

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

| | | | | | | | | | | | | | | | | | | | | | |
|---|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Paul Tonko for Congress | Transaction ID: 06168-0279046893119 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 911 Central Avenue PO Box 221 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 2 | 3 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 1 | 0 | | 2 | 3 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Albany State NY Zip Code 12206 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution General Candidate Name Paul David Tonko | <table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table> | 5000.00 | | | | | | | | | | | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 21 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 011 Category/ Type | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Shelley Moore Capito for Congress | Transaction ID: 06168-2658349871635 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 11519 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 2 | 3 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 1 | 0 | | 2 | 3 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Charleston State WV Zip Code 25339 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution General Candidate Name Shelley Moore Capito | <table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table> | 5000.00 | | | | | | | | | | | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 02 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 011 Category/ Type | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Wulsin for Congress | Transaction ID: 06168-9692651629448 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 1080 Nimitzview Dr. Suite 400 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | | 2 | 3 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 1 | 0 | | 2 | 3 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | |
| City Cincinnati State OH Zip Code 45230 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution General Candidate Name Victoria Wulsin | <table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table> | 5000.00 | | | | | | | | | | | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 011 Category/ Type | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

26000.00